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Attention:	Group Art Unit: 1795	From:	Travis Dodd
Fax:	571-273-8300	Fax:	818-833-2065
Phone:		Phone:	818-833-2014
Company:	U.S. Patent and Trademark Office	Company:	Quallion LLC
		Pages:	Total of (10) Pages
Re:	Application Serial No.: 10/665,687 Title: ELECTRIC STORAGE BATTERY CONSTRUCTION AND METHOD OF MANUFACTURE Filed: September 17, 2003 Examiner: Robert Hodge Group Art Unit: 1795 Attorney Docket No.: Q137-US6		

☐ Urgent ☒ For Review ☐ Please Comment ☒ Please Reply ☐ Please Recycle

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CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)

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Amendment Transmittal Letter (1 page)
Fee Transmittal (1 page)
Amendment (7 pages)

Lisa K. Robbins
(Name of Person Signing Certificate)


(Signature)

Quallion LLC

PO Box 923127, Sylmar, CA 91392-3127 • PH: (818) 833-2000 • FAX: (818) 833-2065

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APR 20 2009

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/665,687
	Filing Date	September 17, 2003
	First Named Inventor	David Skirlo
	Group Art Unit	1795
	Examiner Name	Robert Hodge
Total Number of Pages in This Submission	Attorney Docket Number	Q137-US6

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Authorized <input checked="" type="checkbox"/> Amendment After Final Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53	Assignment Papers <i>(for an Application)</i> Drawing(s) Licensing-related Papers Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) _____	After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> Proprietary Information Status Letter Other Enclosure(s) <i>(please identify below):</i> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>
Remarks _____		

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The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 50-0921. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

Dated: 4/20/2009

 Phone: (818) 833-2003
 Fax: (818) 833-2065
By: 
 Travis Dodd
 Attorneys for Applicant(s)
 P.O. Box 923127
 Sylmar, CA 91392-3127

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail In an envelope addressed to: Commissioner of Patents and Trademarks, Washington, DC 20231 on this date: _____			
Typed or printed name	TRAVIS DODD		
Signature		Date	

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FEE TRANSMITTAL

Attorney Docket No.	Q137-US6
First Named Inventor:	SKINLO, David
Application Number	10/665,687
Filing Date:	September 17, 2003
Examiner Name:	1795
Group/Art Unit:	Robert Hodge

TOTAL AMOUNT OF PAYMENT:	\$.00
METHOD OF PAYMENT (check One)	1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and/or credit any over payment to: Deposit Account No.: 50-0921 Deposit Account Name: Quallion LLC <input checked="" type="checkbox"/> Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17 2. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other - Credit Card

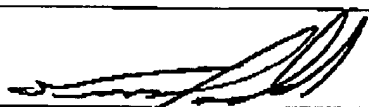
2. UTILITY Basic Filing Fee & Claims

(1) For	(2) No. filed	(3) No. extra	(4) Large Entity	(5) Small Entity	(6) Calculations
Basic Filing Fee	XX	XX	\$330.00	\$165.00	\$0.00
Total Claims	24 - 24 =	0	X \$52.00	X \$26.00	\$0.00
Independent Claims	1 - 3 =	0	X \$220.00	X \$110.00	\$0.00
Multiple Dependent Claim(s) (if applicable)			\$390.00	\$195.00	\$0.00
Total of above Calculations =					\$0.00

Basic Filing Fee	Large Entity	Small Entity	Total
Design filing fee	\$220.00	\$110.00	\$0.00
Reissue filing fee	\$330.00	\$165.00	\$0.00
Provisional filing fee	\$220.00	\$110.00	\$0.00
Total of above Calculations =			\$0.00

3. ADDITIONAL FEES

Fee Description	Large Entity	Small Entity	Other
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
TOTAL:			\$

Name (print/type)	TRAVIS L. DODD	Registration No.: (Attorney/Agent)	42,491
Signature		Date	4/20/2009